Docket No. **0575/62096/JPW/AJM/JCS**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): **David M. Stern, et al.**

Serial No. : **09/687,528**   Examiner: **Shin-Lin Chen**

Filed : **October 13, 2000**   Group Art Unit: **1632**

For : **A Method for Inhibiting New Tissue Growth in Blood Vessels**

in a Patient Subjected to Blood Vessel Injury

Mail Stop Amendment
COMMISSIONER FOR PATENTS   Date: **August 19, 2005**
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment to the above-identified application.

  X   Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been previously established.

  _____   A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

  X   No additional fee is required.

The filing fee is calculated as follows:

	Number after Amend-ment	Highest Number Previously Paid For[1]	Number of Extra Claims Presented	RATE		FEE	
				Small Entity	Other Entity	Small Entity	Other Entity
Total Claims	7 -	* 24 =	*** 0 X	$25	$50 =	0	
Indepen-dent Claims	1 -	** 4 =	*** 0 X	$100	$200 =	0	
Multiple Dependent Claim(s) Presented For First Time _____ Yes **X** No				$180	$360 =	0	
				TOTAL ADDITIONAL FEE		$ **0.00**	

[1] The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.
  * If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
  ** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
 *** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

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Amendment Transmittal Letter
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The following are also enclosed:

 X   One additional copy of this Amendment Transmittal Letter

 X   Return Receipt Postcard

_____ An Information Disclosure Statement, including Form PTO-1449
      (Copies of citations included: Yes_____ No_____
      and a fee of $_____ included)

_____ A Petition for an Extension of Time, including a fee of
      $_____ for a Petition for ___ Month(s) Extension of Time

_____ Other (identify): _____

      _____

      _____

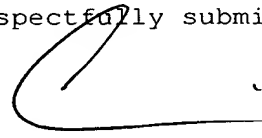THE TOTAL FEE DUE IS $ __**0.00**__.

_____ A check in the amount of $_____ is enclosed.

_____ Please charge Deposit Account No. _____ in the amount of
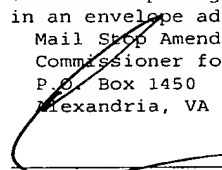 $_____.

 X   The Commissioner is hereby authorized to charge any additional fees
      required or credit any overpayment to Deposit Account No. __03-3125__
      as follows:

      X   Fees under 37 C.F.R. §1.16 for the presentation of extra claims
      _____ Patent application processing fees under 37 C.F.R. §1.17

                              Respectfully submitted,

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Applicants	:	David M. Stern, et al.
U.S. Serial No.:		09/687,528 Examiner: Shin-Lin Chen
Filed	:	October 13, 2000 Group Art Unit: 1632
For	:	A METHOD FOR INHIBITING NEW TISSUE GROWTH IN BLOOD VESSELS IN A PATIENT SUBJECTED TO BLOOD VESSEL INJURY

1185 Avenue of the Americas
New York, New York 10036
August 19, 2005

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SIR:

COMMUNICATION IN RESPONSE TO MAY 20, 2005 FINAL OFFICE ACTION

This Communication is submitted in response to a May 20, 2005 Final Office Action issued by the United States Patent and Trademark Office in connection with the above-identified application. A response to the May 20, 2005 Final Office Action is due August 20, 2005. Accordingly, this Communication is being timely filed.